



# Minimising Functional Decline – Care Coordination Team Implementation & Evaluation at the Geraldton Hospital

**Di Franklin**

**Aged and Community Care**

**WACHS-Midwest**

Combined Universities Centre for Rural Health



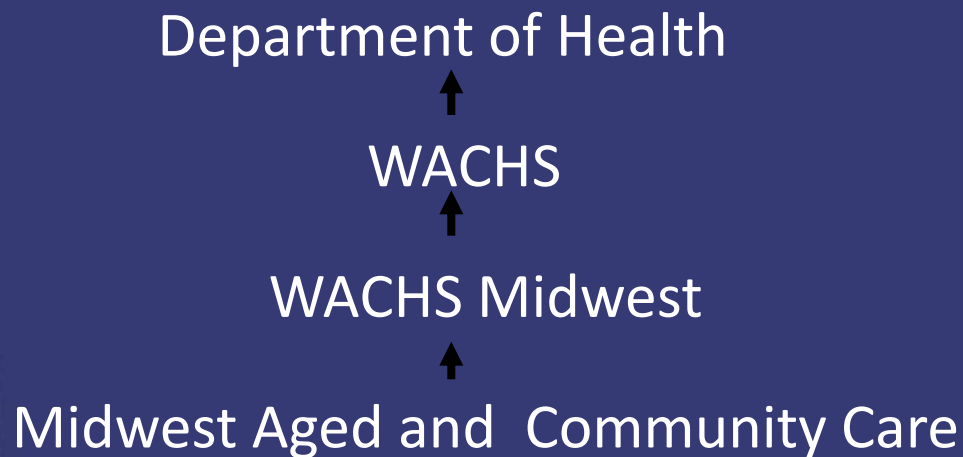
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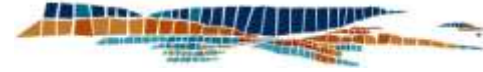
# WA Country Health Service

The largest country health service in Australia and one of the biggest in the world



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# Midwest Aged and Community Care

Aged Care Assessment Team

Midwest Commonwealth Respite & Carelink Centre

Geraldton Community Care

Older Patients Initiative

Transition Care Packages

Sub-acute Care Services

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# Older Patients Initiative

- National Action Plan (July 04)
- Older Patients Initiative (Nov 06)
- WACHS – Midwest (June 07)
- Potential for additional funding after 2010 – but decreasing annually

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## Age-friendly principles and practices

Managing older people in the health service environment

Developed on behalf of the Australian Health Ministers' Advisory Council (AHMAC)  
by the AHMAC Care of Older Australians Working Group.

Endorsed by Australian Health Ministers, July 2004

## A guide for assessing older people in hospitals

Developed by the Centre for Applied Gerontology, Bundoora Extended Care Centre, Northern Health.  
Commissioned on behalf of the Australian Health Ministers' Advisory Council  
(AHMAC) by the AHMAC Care of Older Australian Working Group.

September 2004

Best practice approaches to minimise  
functional decline in the older person  
across the acute, sub-acute and  
residential aged care settings

Developed by the Clinical Epidemiology and Health Services Evaluation Unit, Melbourne Health.  
Commissioned on behalf of the Australian Health Ministers' Advisory Council (AHMAC)  
by the AHMAC Care of Older Australian Working Group.

November 2004

Clinical Practice Guidelines  
for the Management  
of Delirium in Older People

Developed by the Clinical Epidemiology and Health Service Evaluation Unit, Melbourne Health  
in collaboration with the Delirium Clinical Guidelines Expert Working Group. Commissioned on behalf  
of the Australian Health Ministers' Advisory Council (AHMAC), by the AHMAC Health Care  
of Older Australians Standing Committee (HCOASC).

October 2006





# Scoping Study

- Literature review
- Consultation with Hospital staff and services
- Inpatient mapping process
- Analysis of ED presentation data
- Scoping of other WA Care Coordination Teams
  - rural and metro

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# Steering Committee

- Results of scoping study presented with several models for a CCT (May 2008)
- Committee endorsed model which supported OPI Coordinator in ED and CCT on ward
- CCT to:
  - Follow up high risk patients
  - Minimise functional decline
  - Provide education to ward staff

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# Implementation and Evolution

- CCT commenced on ward in July 08
- Initially MD AH team (1.0FTE)
- Then (1.0FTE) Social Worker
- Then (1.0FTE) RN
- Now (1.0FTE) CN with Clinical Education experience

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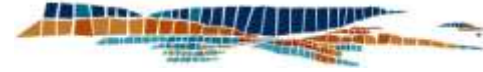
# CCT Services

- Clinical Nurse:
  - Assessment & care planning to minimise functional decline
  - Implemented delirium pathway
  - Education to ward staff
- Enrolled Nurse/Therapy Assistant:
  - Outdoor walking groups
  - Exercise and cognitive groups
  - 1:1 programs

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# CUCRH Aged Care Research Fellowship

- Funded by
  - Combined University Centre for Rural Health
  - WACHS – Aged Care Directorate

***Evaluation of the effectiveness and impact of the implementation of a Care Coordination Team on the general ward at Geraldton Hospital***

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# Ethics Approval

- University of Western Australia Human Research Ethics Committee – Dec 08
- WA Country Health Service Board Research Ethics Committee–Mar 09

# Aims

- To evaluate CCT's effectiveness in reducing functional decline
- To assess the impact CCT referrals had on Allied Health
- If positive develop a business case

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# Medical Record Audit

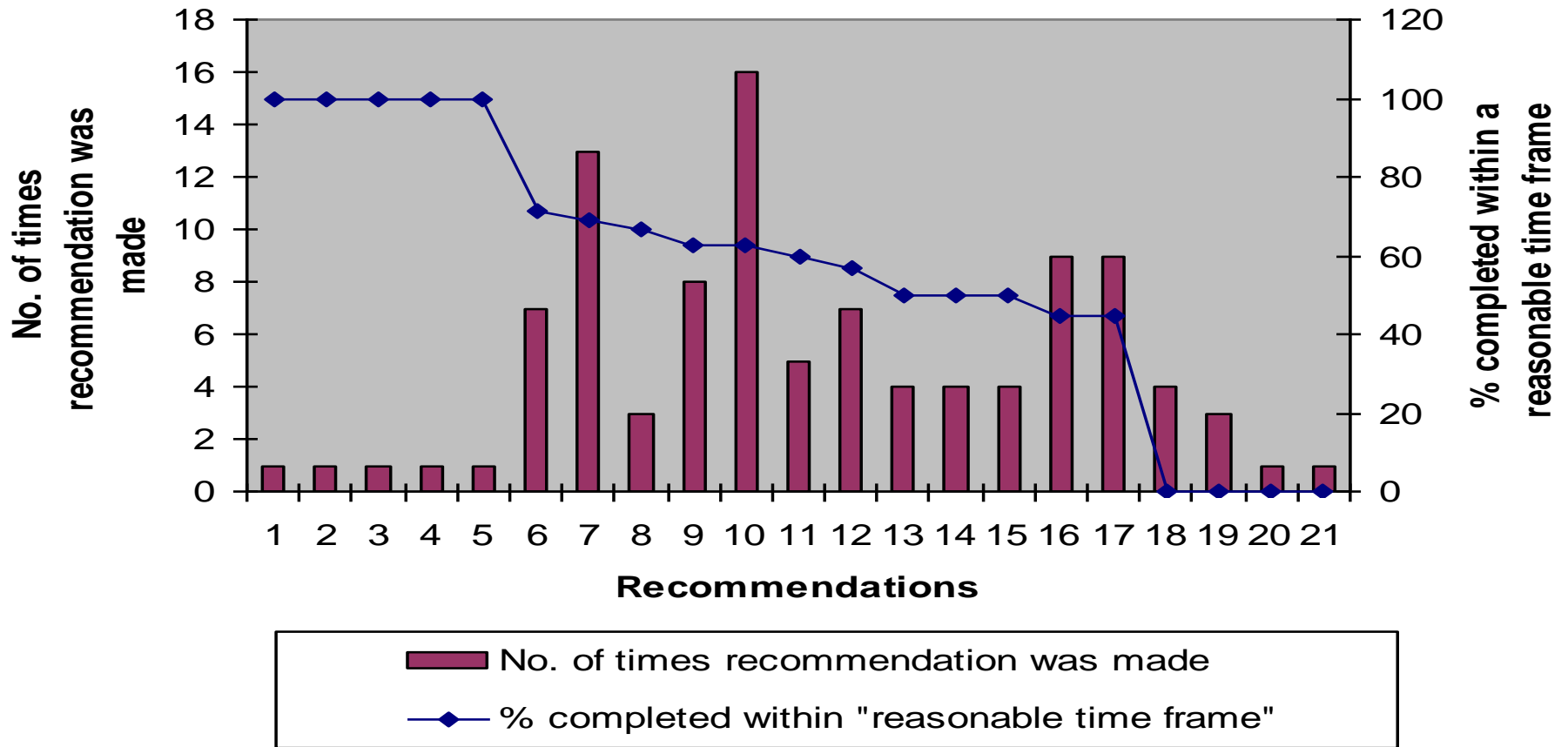
- 88 patients seen by CCT in January & June 2009.
- 84 medical records were audited:
  - 47 patients had no recommendations
  - 37 patients had a CCT assessment resulting in 144 recommendations
- Of which:
  - 103 were nursing care recommendations
  - 41 were referrals and recommendations to other disciplines.

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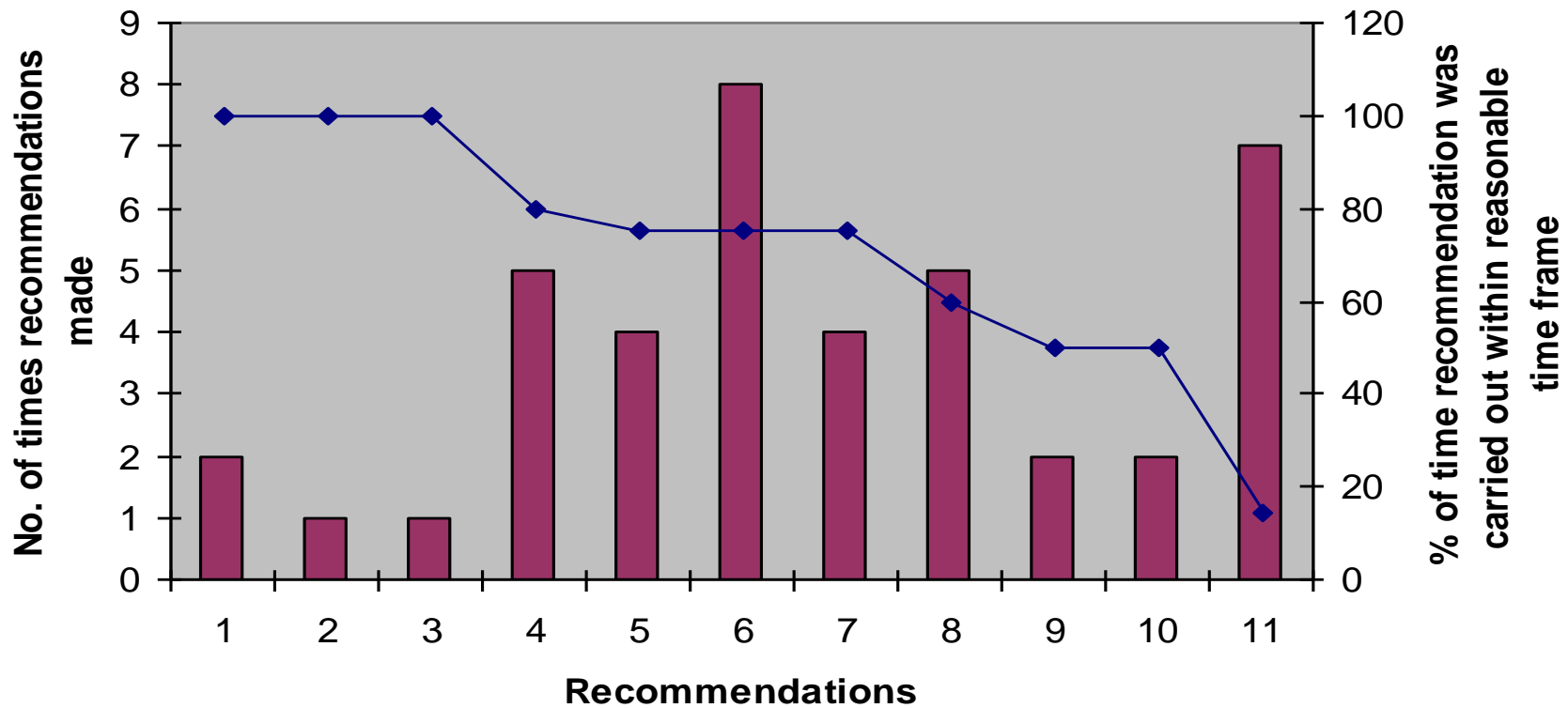
# Medical Record Audit - Results

## Nursing Recommendations made by CCT



# Medical Record Audit - Results

## Other CCT Recommendations



- No. of times recommendation was made
- ◆ % completed within "reasonable time frame"

# Health Professional Interviews

- 9 staff interviewed from 2 RACFs
  - Regarding the level of functional decline residents had following admission to Geraldton Hospital
- 15 ward nursing staff interviewed
  - CCT Clinicians role
  - Functional Decline Education Sessions
  - EN/TA role and programs

# Health Professional Interview

## RACF Results

- D/Ced residents were functionally declined (esp. skin integrity, delirium, mobility)
- due to resident's acute medical condition
- nursing staff don't have time/attitude/skills (?) to manage functional decline in acutely unwell residents
- CCT has an important role in addressing this

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# Health Professional Interview

## Nursing Staff Results

- minimises functional decline and reduces LOS
- CCT recommendations assist staff in their care
- content was appropriate and useful
- should continue on an ongoing basis
- has the potential to reduce LOS
- provides valuable stimulation for CAP patients

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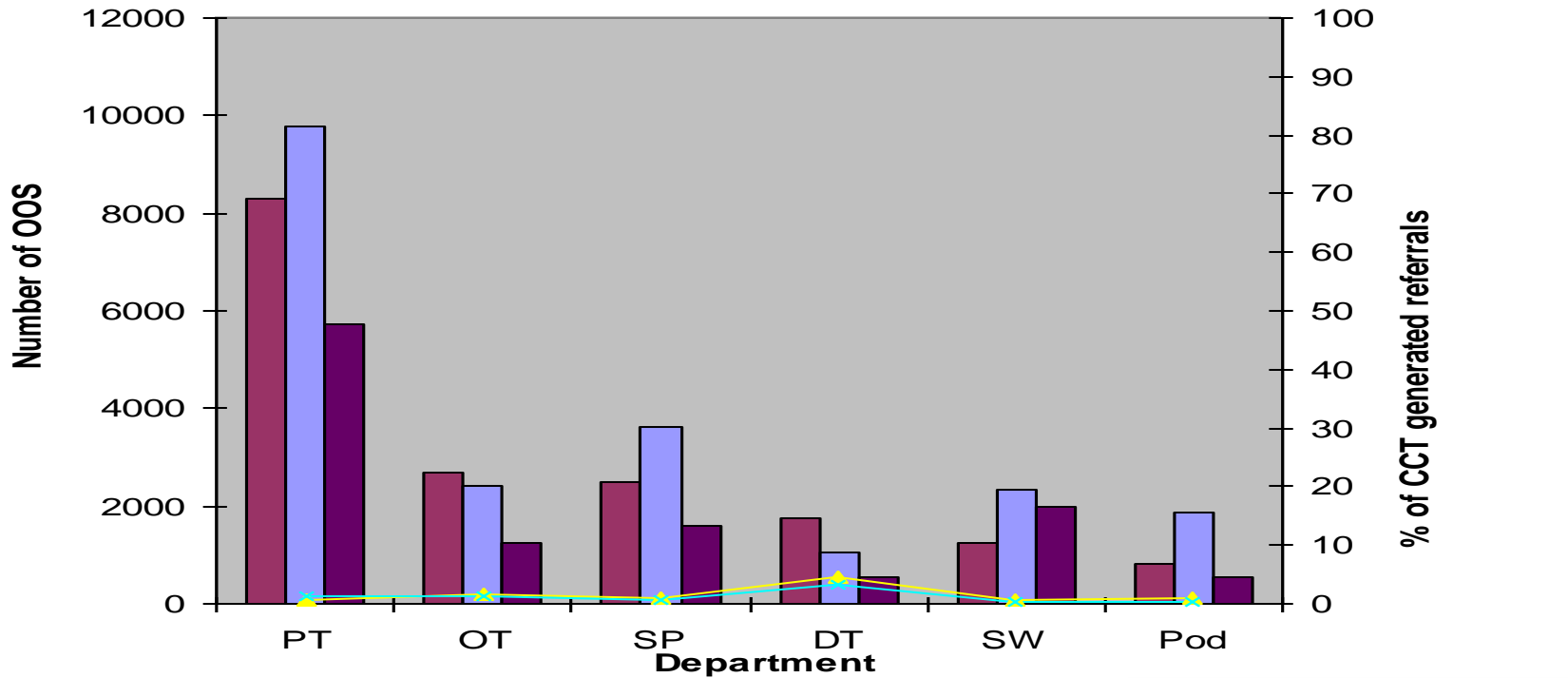
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# Allied Health Data Analysis

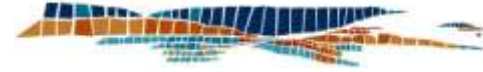
- Did the number of referrals generated by CCT have an impact on AH OOS?
- The total OOS for each department was compared with the number of referrals made by the CCT to each department, for the following years:
  - 2007/2008 – prior to the CCT commencing
  - 2008/2009 – CCT commenced
  - 2009/2010 – July 09 – Jan 10 – CCT continues

# Data Analysis - Results

**Allied Health OOS vs % referrals generated from CCT**



- 07/08 OOS
- 08/09 OOS
- 09/10 OOS (YTD)
- ▲ % 08/09
- × % 09/10



# Recommendations

- That CCT continues ( + business case)
- That EN/TA continues ( + business case)
- Regular education sessions continue
- CCT assesses all residents, including communication with RACF staff
- That the results are disseminated to all key stakeholders



# Outcomes

- CCT Clinician & EN/TA business cases completed and supported by Exec Committee
- CCT Clinician & EN/TA permanent positions created and recruitment will commence in Dec 2010



# WA Country Health Service – Midwest

A great place to work

A great place to live

A great place to grow old



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